

COPY

UNITED STATES OF AMERICA

**DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**

As a below named inventor(s), I/We hereby declare that:

My/Our residence(s), post office address(es) and citizenship(s) are as stated below my name(s).
I/We verily believe I am/we are the original, first and sole/joint inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SULFURIC ACID MONO-[3-(1-[2-(4-FLUORO-PHENYL)-ETHYL]-PIPERIDIN-4-YL)-HYDROXY-METHYL]-2-METHOXY-PHENYL]ESTER

and the specification of which is attached hereto (Attorney Docket No. HMR2037 CIP 1)
(check one) was filed on _____ as U.S. Application Number _____
 and was amended on _____ (if applicable).
 was described and claimed in PCT Int'l Application Number _____ filed on _____
and as amended under PCT Article 19 on _____ (if any).

I/We hereby state that I/We have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment referred to above.

I/We acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 C.F.R. 1.56.

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Foreign Priority: Number _____ Country _____ Day/Month/Year Filed _____

Prior Foreign Appln(s): Number _____ Country _____ Day/Month/Year Filed _____

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60/198,215 July 16, 1999
Number Filing Date

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09/615,246 July 13, 2000 Pending
Application Serial No. Filing Date Status (Patented, Pending)

I/We hereby appoint the attorneys and/or agents associated with the Customer No.(s) provided below as my/our attorneys and/or agents with full power to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer No.: 005487

I/We hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States code §1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventors(s): Additional names and signatures are attached.

1. Full name: BERNOTAS, Ronald Charles

Signature: Ronald Charles Bernotas

Date: 6/6/2002

Country of Citizenship: United States of America

Residence: Bridgewater, New Jersey, USA
(City and State/City and Country only)

P. O. Address: 106 Wicklow Way
Bridgewater, NJ 08807

3. Full name: EMMONS, Gary Thomas

Signature: _____

Date: _____

Country of Citizenship: United States of America

Residence: Washington, New Jersey, USA
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P. O. Address: 5 Oakwood Lane
Washington, NJ 07882

5. Full name: _____

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Date: _____

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Residence: _____
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7. Full name: _____

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Leawood, KS 66209

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Signature: _____

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Slingerlands, NY 12159

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P. O. Address: _____

Aventis Pharmaceuticals Inc.
Patent Department
Route #202-206
P.O. Box 6800
Mail Code EMC-G1
Bridgewater, NJ 08807-0800
Telephone (908) 231-3364
Telefax (908) 231-2626

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7. Full name: _____

Signature: _____

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Residence: _____

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P. O. Address: _____

2. Full name: BROWN, Paul Wayne

Signature: Paul W. Brown

Date: 6-11-02

Country of Citizenship: United States of America

Residence: Kansas City, Missouri, USA

(City and State/City and Country only)

P. O. Address: 13104 Canterbury

Leawood, KS 66209

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Signature: _____

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Country of Citizenship: United States of America

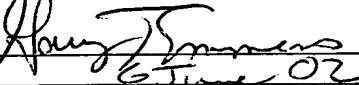
Residence: Bridgewater, New Jersey, USA

(City and State/City and Country only)

P. O. Address: 106 Wicklow Way

Bridgewater, NJ 08807

3. Full name: EMMONS, Gary Thomas

Signature: 

Date: 6 June 02

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P. O. Address: 13104 Canterbury

Leawood, KS 66209

4. Full name: KING, Chi-Hsin Richard

Signature: Chi-Hsin R King

Date: June 8, 2002

Country of Citizenship: United States of America

Residence: Slingerlands, New York, USA

(City and State/City and Country only)

P. O. Address: 709 Wasentha Way

Slingerlands, NY 12159

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